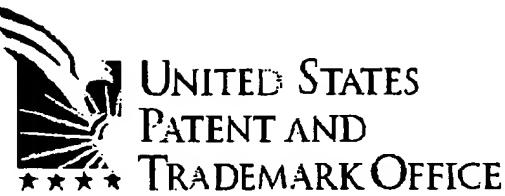


T0:Auto-reply fax to 805 541 2868 COMPANY:

Auto-Reply Facsimile Transmission



TO:

Fax Sender at 805 541 2868

Fax Information

Date Received:

6/3/02 9:10:15 PM [Eastern Daylight Time]

Total Pages:

15 (including cover page)

ADVISORY: This is an automatically generated return receipt confirmation of the facsimile transmission received by the Office. Please check to make sure that the number of pages listed as received in Total Pages above matches what was intended to be sent. Applicants are advised to retain this receipt in the unlikely event that proof of this facsimile transmission is necessary. Applicants are also advised to use the certificate of facsimile transmission procedures set forth in 37 CFR 1.8(a) and (b), 37 CFR 1.6(f). Trademark Applicants, also see the Trademark Manual of Examining Procedure (TMEP) section 702.04 et seq.

Received
Cover
Page
=====>

06/03/2002 18:11 FAX 805 541 2868 5540 001		
Please type a plus sign (+) inside this box → <input type="text"/>		
<small>PTO/SB/21 (08-00) Approved for use through 10/01/2002. GPO: 2001-003 U.S. Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.</small>		
TRANSMITTAL FORM <small>(To be used for all correspondence after Initial Filing)</small>		
Application Number <input type="text" value="09/751,609"/> Filing Date <input type="text" value="Dec 28, 2000"/> First Named Inventor <input type="text" value="Traylor, Marc"/> Group Art Unit <input type="text" value="3632"/> Examiner Name <input type="text" value="Holly Sy"/> Total Number of Pages in This Submission <input type="text" value="15"/> Attorney Docket Number <input type="text" value="3066.001"/>		
ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit(s)/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.62 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) Remarks	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	<input type="text" value="SINSHEIMER, SCHIEBELHUT & BAGGETT, by Thomas F. Lebars"/>	
Signature		
Date	<input type="text" value="June 3, 2002"/>	
CERTIFICATE OF TRANSMISSION		
I hereby certify that this correspondence is being transmitted to the United States Patent and Trademark Office via T03-072-0326 on this date: <input type="text" value="June 3, 2002"/>		
Type or printed name	<input type="text" value="Thomas F. Lebars"/>	
Signature		
<small>Batch Hour Statement: This form is designed to take 0.2 hours to complete. This will vary depending upon the needs of the individual case. Any charges on the account of this form will be applied to the individual case. Please do not send fees or completed forms to the address. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THE ADDRESSEES.</small>		

*** RX REPORT ***

RECEPTION OK

TX/RX NO	6186
CONNECTION TEL	
CONNECTION ID	
ST. TIME	06/03 18:17
USAGE T	00'44
PGS.	1
RESULT	OK

 *** TX REPORT ***

TRANSMISSION OK

TX/RX NO	2831
CONNECTION TEL	
CONNECTION ID	17038729326
ST. TIME	06/03 18:11
USAGE T	05 '06
PGS. SENT	15
RESULT	OK

Please type a plus sign (+) inside this box →

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0851-0031

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM		Application Number	09/751,609	
		Filing Date	Dec 28, 2000	
		First Named Inventor	Traylor, Marc	
		Group Art Unit	3632	
		Examiner Name	Holly Sy	
Total Number of Pages In This Submission		15	Attorney Docket Number	3066.001

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	SINSHEIMER, SCHIEBELHUT & BAGGETT, by Thomas F. Levens <i>[Signature]</i>
-------------------------	--

Please type a plus sign (+) inside this box → +

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

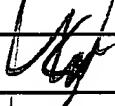
(to be used for all correspondence after initial filing)

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/751,609
		Filing Date	Dec 28, 2000
		First Named Inventor	Traylor, Marc
		Group Art Unit	3632
		Examiner Name	Holly Sy
Total Number of Pages in This Submission	15	Attorney Docket Number	3066.001

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i>	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

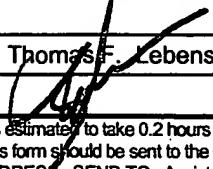
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	SINSHEIMER, SCHIEBELHUT & BAGGETT, by Thomas F. Lebens	
Signature		
Date	June 3, 2002	

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being transmitted to the United States Patent and Trademark Office via 703-872-9326 on this date:

June 3, 2002

Type or printed name	Thomas F. Lebens		
Signature		Date	June 3, 2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

 Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 502)

Complete if Known

Application Number	09/751,609
Filing Date	12/28/2000
First Named Inventor	Traylor
Examiner Name	Holly Sy
Group Art Unit	3632
Attorney Docket No.	3066.001

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
 Deposit Account

Deposit Account Number	501616
Deposit Account Name	SINSHEIMER, SCHIEBELHUT & BAGGETT

The Commissioner is authorized to: (check all that apply)

 Charge fee(s) indicated below Credit any overpayments

 Charge any additional fee(s) during the pendency of this application EXCEPT ISSUE FEE.

 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee (\$)	Fee (\$)
101	201	740	370
106	206	330	165
107	207	510	255
108	208	740	370
114	214	160	80

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Extra Claims	Fee from below	Fee Paid
20 -20**= 4	X 1	= 42
- 3**= 1	X	=

Multiple Dependent

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	Fee (\$)
103	203	18 9
102	202	84 42
104	204	280 140
109	209	84 42
110	210	18 9

SUBTOTAL (2) (\$ 42)

** or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity Small Entity

Fee	Fee	Fee	Fee	Fee Paid
105	130	205	65	Surcharge – late filing fee or oath
127	50	227	25	Surcharge – late provisional filing fee or cover sheet
139	130	139	130	Non-English specification
147	2,520	147	2,520	For filing a request for ex parte reexamination
112	920*	112	920*	Requesting publication of SIR prior to Examiner action
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action
115	110	215	55	Extension for reply within first month
116	400	216	200	Extension for reply within second month
117	920	217	460	Extension for reply within third month
118	1,440	218	720	Extension for reply within fourth month
128	1,960	228	980	Extension for reply within fifth month
119	320	219	160	Notice of Appeal
120	320	220	160	Filing a brief in support of an appeal
121	280	221	140	Request for oral hearing
138	1,510	138	1,510	Petition to institute a public use proceeding
140	110	240	55	Petition to revive – unavoidable
141	1,280	241	640	Petition to revive – unintentional
142	1,280	242	640	Utility issue fee (or reissue)
143	460	243	230	Design issue fee
144	620	244	310	Plant issue fee
122	130	122	130	Petitions to the Commissioner
123	50	123	50	Processing fee under 37 CFR 1.17(q)
126	180	126	180	Submission of Information Disclosure Stmt
581	40	581	40	Recording each patent assignment per property (times number of properties)
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))
179	740	279	370	Request for Continued Examination (RCE)
169	900	169	900	Request for expedited examination of a design application

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 460)

SUBMITTED BY

Complete if applicable

Name (Print/Type)	Thomas F. Hebens	Registration No. (Attorney/Agent)	38221	Telephone	(805) 781-2865
Signature				Date	June 3, 2001

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.